

APPLICATION DATA SHEET

Application Information

Application Number::
Filing Date:: 09/23/03
Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R:: None
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?::
Number of Copies of CRF::
Title Line One:: System, Method and Software Application
Title Line Two:: for Secure Communication
Attorney Docket Number:: 57132.000008
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 3
Total Drawing Sheets:: 3
Small Entity?:: No
Petition Included?::
Petition Type::
Licensed US Government Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Application?::

Applicant Information

Applicant One Authority Type:: Inventor
Primary Citizenship:: USA
Country::
Status:: Full Capacity

Applicant One Given Name:: John
Middle Name::
Family Name:: HANE
Name Suffix::
City of Residence:: Bethesda
State or Province of Residence:: MD
Country of Residence:: USA
Street of Mailing Address Line One:: 7503 Clarendon Road
Street of Mailing Address Line Two::
City of Mailing Address:: Bethesda
State or Province of Mailing Address:: MD
Country of Mailing Address:: USA
Postal or Zip Code:: 20814

Correspondence Information

Correspondence Customer No.:: 21967
Name:: Hunton & Williams LLP
Street of Mailing Address Line One:: 1900 K Street, N.W.
Street of Mailing Address Line Two:: Suite 1200
City of Mailing Address: Washington
State or Province of Mailing Address:: DC
Country of Mailing Address:: USA

Postal or Zip Code:: 20006
Telephone Number:: (202) 955-1500
Facsimile Number:: (202) 778-2201
E-Mail Address:: hkerner@hunton.com

Representative Information

Representative Customer Number:: 21967

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional of	60/412,590	09/23/2002

Foreign Priority Information

Country:	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name::
Street of Mailing Address Line One::
Street of Mailing Address Line Two::
City of Mailing Address::
State of Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code::